Fill in this informati	ion to identify your case:	
Debtor 1	Joshua Luke Herd	
Debtor 2 (Spouse, if filing)	Amanda Marie Herd	
United States Banl	kruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
l .	2:17-bk-50496	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter
Official For	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	E	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Driver	STNA
	Include part-time, seasonal, or self-employed work.	Employer's name	СОТА	National Church Residences
	Occupation may include student or homemaker, if it applies.	Employer's address	33 N. High Street Columbus, OH 43215	2335 North Bank Drive Columbus, OH 43220
		How long employed the	here? 1 week	5 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,302.82 \$ 2,974.51

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 3,302.82 \$ 2,974.51

Official Form 106I Schedule I: Your Income page 1

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Debto Debto		Amanda Marie Herd		Case	number (if known)	2:17-bk-	0496	
				For	Debtor 1	For Debt	or 2 or g spouse	
	Cop	by line 4 here	4.	\$	3,302.82	\$	2,974.51	
5.	l ist	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	654.85	\$	616.46	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	\$ -	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	386.21	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify: Dental	5h.+	\$	28.10	+ \$	6.50	
		Health Ins.		\$_	162.70	\$	104.00	
		Life Ins.		\$_	0.00	\$	0.50	
		Vision		\$_	6.46	\$	2.17	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,238.32	\$	729.63	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,064.50	\$	2,244.88	
	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$_	0.00	\$	0.00	
	8b.		8b.	\$_	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	e nt 8c.	\$	0.00	\$	280.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	280.00	
		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,064.50 + \$	2,524.8	= \$	4,589.38
	Incl othe Do	te all other regular contributions to the expenses that you list in Schedulude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are necify:	our depend		•	ted in <i>Sched</i>	lule J. 1. +\$	0.00
		d the amount in the last column of line 10 to the amount in line 11. The te that amount on the Summary of Schedules and Statistical Summary of Ce lies					·	4,589.38
13.	Do.	you expect an increase or decrease within the year after you file this fo	rm?				Combine monthly	
١٥.		No.						
		Yes. Explain:						

Fill in this inform	ation to identify y	our case:						
Debtor 1	Joshua Luk				Chec	ck if this is:		
					An amended filing			
Debtor 2 (Spouse, if filing)	Amaria marie riera					A supplement show 13 expenses as of	ving postpetition chapte the following date:	
United States Banl	kruptcy Court for the	e: SOUTH	HERN DISTRICT OF OHIO)	MM / DD / YYYY			
Case number (If known)	::17-bk-50496							
Official Fo	orm 106J							
Schedule	J: Your	Exper	nses				12	
number (if known part 1: Description 1. Is this a join □ No. Go the results ■ Yes. Do	wn). Answer ever cribe Your House int case? to line 2. es Debtor 2 live	ery question	rate household?				our name and case	
		_						
•	ve dependents? Debtor 1 and	□ No ■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 2		Dependent's age	Does dependent live with you?	
Do not state				0		•	□ No	
dependents	s names.			Son		8	Yes	
				Daughter		10	□ No ■ Yes	
				Daugittei			■ Yes □ No	
							☐ Yes	
							□ No	
expenses	penses include of people other t ad your depende	than	l No l Yes				□ Yes	
Part 2: Estir	nate Your Ongo	ina Month	ly Evnenses					
Estimate your e	expenses as of y a date after the	our bankr	uptcy filing date unless y cy is filed. If this is a supp					
	ch assistance ar		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses	
	or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	4. \$	S	1,000.00	
If not inclu	ded in line 4:							
4a. Real	estate taxes				4a. \$	3	0.00	

4b. \$

4c. \$

4d. \$

0.00

0.00

0.00

Property, homeowner's, or renter's insurance

Home maintenance, repair, and upkeep expenses

Additional mortgage payments for your residence, such as home equity loans

Homeowner's association or condominium dues

4b.

Debtor		0 1 ("1	2:17-bk-50496
Debtor	2 Amanda Marie Herd	Case number (if known)	<u></u>
6. U t	tilities:		
68	a. Electricity, heat, natural gas	6a. \$	135.00
6k	o. Water, sewer, garbage collection	6b. \$	115.00
60	c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	150.21
60	d. Other. Specify: Natural gas	6d. \$	220.00
7. F c	ood and housekeeping supplies	7. \$	1,285.00
8. C l	hildcare and children's education costs	8. \$	0.00
9. C l	othing, laundry, and dry cleaning	9. \$	115.00
	ersonal care products and services	10. \$	115.00
	edical and dental expenses	11. \$	225.00
	ansportation. Include gas, maintenance, bus or train fare.	12. \$	450.00
	o not include car payments.	·	
	ntertainment, clubs, recreation, newspapers, magazines, and books	13. \$	45.00
	haritable contributions and religious donations	14. \$	0.00
	surance. o not include insurance deducted from your pay or included in lines 4 or 20.		
	ia. Life insurance	15a. \$	0.00
15	b. Health insurance	15b. \$	0.00
15	ic. Vehicle insurance	15c. \$	180.00
	5d. Other insurance. Specify:	15d. \$	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.	·	
	pecify:	16. \$	0.00
17. In	stallment or lease payments:		
	'a. Car payments for Vehicle 1	17a. \$	0.00
	b. Car payments for Vehicle 2	17b. \$	0.00
	c. Other. Specify:	17c. \$	0.00
	d. Other. Specify:	17d. \$	0.00
	our payments of alimony, maintenance, and support that you did not report a		0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	18. \$ 	
	ther payments you make to support others who do not live with you.	ν 19.	0.00
	pecify: ther real property expenses not included in lines 4 or 5 of this form or on <i>ScI</i>		
	a. Mortgages on other property	20a. \$	0.00
	Db. Real estate taxes	20b. \$	0.00
	Oc. Property, homeowner's, or renter's insurance	20c. \$	0.00
	od. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	De. Homeowner's association or condominium dues	20e. \$	0.00
	ther: Specify: Babysitting for children	21. +\$	216.67
	ees for the children's sports (\$450/year)	+\$	37.50
			37.30
	alculate your monthly expenses		
	Pa. Add lines 4 through 21.	\$	4,289.38
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22	2c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,289.38
23 C :	alculate your monthly net income.		
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,589.38
	Bb. Copy your monthly expenses from line 22c above.	23b\$	4,289.38
20	2. Copy your morning expenses non-mile 220 above.		4,203.30
23	Sc. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	300.00
	The readicies your monuny net mooning.	<u> </u>	
Fo	o you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect yo		rease or decrease because of a
_	odification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		

Fill in this info	rmation to identify your	case:				
Debtor 1	Joshua Luke Herd					
	First Name	Middle Name	Last Name			
Debtor 2 Amanda Marie He		erd				
(Spouse if, filing) First Name		Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO			
Case number	2:17-bk-50496					
(if known)						

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

ey to help you fill out bankruptcy forms?
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
x /s/ Amanda Marie Herd Amanda Marie Herd Signature of Debtor 2